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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	10/511,813
		Filing Date	October 19, 2004
		First Named Inventor	Johannes COY
		Art Unit	1642
		Examiner Name	Sean E. Aeder
Total Number of Pages in This Submission		Attorney Docket Number	4007-008

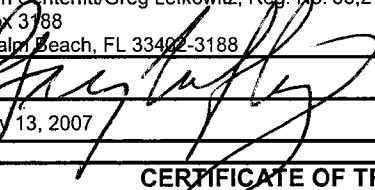
ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

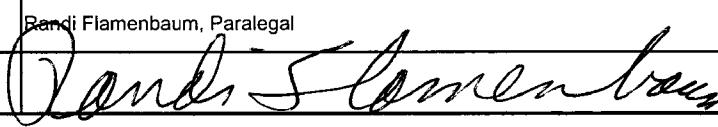
Authorization is given to charge any necessary fees to Deposit Account No. 50-0951.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Akerman Senterfitt/Greg Lefkowitz, Reg. No. 56,216 P.O. Box 3188 West Palm Beach, FL 33402-3188
Signature	
Date	February 13, 2007

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Randi Flamenbaum, Paralegal		
Signature			Date
			February 13, 2007

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